

Graham (2)

Presented by
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MASSAGE

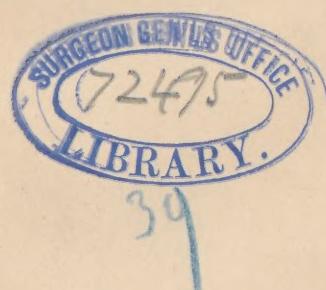
IN

AMENORRHœA AND DYSMENORRHœA.

BY

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MASSAGE IN AMENORRHœA AND DYSMENORRHœA.

BY DOUGLAS GRAHAM, M. D., OF BOSTON.

CASE I. At fourteen years of age, Miss —— began to menstruate, and this function continued to recur for three years and a half, but was always from ten days to three weeks too late. The menses then ceased for two years and a half, and no local cause could be discovered to account for the interruption. During this interval, tonics, emmenagogues, horseback riding, and a year's travel in Europe were tried, but apparently without effect. Though the physical condition of the patient seemed to be good,—her body well nourished, her complexion ruddy, her sleep and appetite fair,—yet she became more and more low-spirited. For this condition she, or rather her relatives, sought the advice of Dr. Tyler. He at once advised a thorough trial of massage.

In January, 1875, when I began giving her massage, the patient had been in the habit of walking two or three miles daily in suitable weather; but it was only from a sense of duty, and with great effort and disinclination that she did anything, physical or mental. There were no sanguine expectations on her part of benefit from any treatment whatever.

The mode of procedure was manipulation of the whole body, with percussion of the back, resisting movements (acto-passive motion) of the feet, legs, and thighs in all their natural directions, particularly those of abduction and adduction; this treatment was administered every other day. After seven applications of massage, the menses came, and lasted three days, though rather scanty, having been suspended for two years and a half. Throughout the following month the same treatment was continued, with a view of increasing nerve force, but resisting movements were omitted until within a week of the next expected monthly period. At this time Dr. Tyler prescribed, in addition to massage, tincture of guaiac, in which gin was the menstruum. The menses, this month, appeared five days after what is considered the proper period, though formerly at the best they had always been from ten days to three weeks too late. All treatment was now discontinued until within a week of the next expected return, when tincture of guaiac and massage were resumed. The catamenia this time did not appear until nineteen days after the proper date; this delay was attributed by the patient's friends to the discontinuance of treatment for three weeks. This view would seem to be somewhat favored by the result of the ensuing month, for

massage and guaiac were renewed two weeks prior to the hoped-for event, and exactly twenty-eight days from the last flow menstruation recurred again. The quantity each time after the first was what the patient considered about normal. Her mental condition was not improved.

At the first visit this patient's tissues seemed to me to be exceedingly dense, matted, and inelastic; at the fourth visit I found them more supple and elastic, in consistence with her easy mode of living.

In marked contrast with the condition of the tissues observed in the previous case, and with the probable effect of massage upon it, is the flabby, atonic state of muscles resulting from long illness in the following case.

CASE II. After unusual exertion and anxiety in nursing her mother and sister, Miss A. suffered great nervous prostration. The trouble at first, the patient said, was all in her head; she was very sleepless and had frequent attacks of hysteria. Several months later she was seized with intestinal catarrh, and as this was accompanied with great pain it aided very much in reducing her. From this she gradually recovered so as to be able to sit up for a few minutes at a time. A persistent back-ache and profuse leucorrhœa appearing called attention to the uterus, which was found to be anteverted. When tenderness had subsided so as to admit a Hodge's pessary, this, with a bandage around the abdomen, afforded great relief. Menstruation was regular as to time, though painful and scanty, lasting but a day and passing only when the patient was sitting up.

In the mean time the hysteria continued, at times closely simulating peritonitis, and her physician, Dr. Nichols, of Cambridge, informed me that hysterical convulsions, mania lasting from a few hours to several days, and transient aphonia were also of common occurrence. Injections of asafoetida alleviated these attacks, and a course of tonics and electricity had improved her so that she could be up four hours daily, an hour or two at a time. Excepting the occasional use of a vegetable bitter, nothing had been administered for two or three months, when Dr. Nichols "was led to suggest massage because he thought the muscles might in this way receive the exercise which they so much needed, and which the patient could not or would not take in the ordinary way."

Massage was begun in this case in May, 1875, when the patient had been an invalid for over two years. At this time she was taking nothing but a gentle laxative every day. Careful manipulation alone had to be used in this case, as anything like acto-passive motion, except of the feet and arms, was very apt to give rise to abdominal pain, which was frequently referred to one or the other of the ovarian regions, and sometimes followed by hysterical convulsions. After my second visit the laxative was laid aside in the hope that the kneading of the abdo-

men would produce the same effect ; in this we were not disappointed, as she had a natural daily dejection, without medicine. I visited her two or three times a week, and employed massage ten times before her next monthly period. When this arrived the menses came, somewhat to our surprise, while the patient was lying down ; the flow appeared in that position the first time in sixteen months, and lasted two days (whereas the usual duration had been but one), with much less pain and bearing down than had been habitual. She was under massage two months longer, and in each the menses came with less discomfort, and while she was in the recumbent posture. This improvement has continued, as I have since been informed.

With regard to the aches, those of the back and head, as well as the uncomfortable feelings in the abdomen, were alleviated at each application of massage, and the patient was greatly soothed, sometimes to sleep. The cold hands and feet were made warmer, not merely for the time, but permanently. The muscles gained in size and firmness, and the patient walked with much less scuffling of the feet and went up and down stairs naturally. But still she was a great invalid, unable to ride in a carriage without suffering pain in the back and abdomen, though she could walk two or three squares with ease. I think that in her great desire to get well she rather overestimated her improvement. Dr. Nichols has recently written me as follows : " That benefit has resulted from the massage seems to me clear. The muscles, especially of the legs, are stronger. With these changes has come improvement in other directions. The severe headaches have mainly disappeared, the catamenia are more natural in quantity, and the pain has greatly abated."

Dr. Stoddard, of Northampton, has very kindly sent me his notes of the two following cases in which he employed massage, not by relegating it to the nurse or one of the patient's relatives, as is usually the way, when it is almost sure to be done in a slipshod manner, or, what is worse, overdone, but by applying it himself.

CASE III. " A patient of a spare habit and decided nervous temperament, suffering from chronic inflammation of the uterus, with ulceration, and from nervous prostration, in addition to other troublesome symptoms, was the subject of obstinate sleeplessness, which had obtained for some time before she came under my care. ' Nature's sweet restorer ' was usually sought in vain until three or four o'clock A. M., when a couple of hours of uneasy slumber were obtained. At my suggestion she had used various remedial agents,— chloral, bromide of potassium, lupulin, hyoscyamus, and morphine, alone or in combination,— for several weeks, but with indifferent success. One evening I was induced to employ massage for the first time in her case, in the hope of relieving the reflex pain in the back and limbs, which at that time was

especially troublesome and persistent. The application proved so agreeable to my patient, and so promptly and effectually relieved the pain for which it was employed, that at the same sitting I extended its use to the rest of the body, and with a very gratifying result; for soon after I left her, a drowsiness which was then quite evident passed into a quiet and refreshing sleep, from which she did not awake until six A. M. Its subsequent employment in this case has never failed, except when severe pain has been present, to secure for her a good night's rest. Furthermore, its regular employment three times a week, for about three weeks after the first trial, not only much improved the capillary circulation, which had been quite languid previously, but seemed to be largely instrumental in securing a regular and healthy menstrual flow, after an absence of at least six months. A variety of emmenagogues had previously been prescribed without effect.

"I take this occasion to state that at the time referred to, this patient had been taking for some weeks a preparation of quinine, strychnia, and phosphoric acid, and was under local treatment for the uterine inflammation, and that in my judgment important indications were met by massage when other remedial agents proved inadequate or were slowly operative. In the case of the same patient, a nervous headache, to which she had been long subject, was always much alleviated by the application of massage to the head."

CASE IV. "I have under my care another patient with uterine inflammation of eight or ten years' standing, characterized by an enlarged and indurated cervix and retroflexed body of the uterus, with marked menstrual irregularity and with severe dysmenorrhœa. When she came under my care, some two years since, the approach of the menses was accompanied by excessive pain and a series of hysterico-nervous convulsions. She was also the subject of a variety of reflex symptoms, among which may be cited, as most prominent, pain and tenderness in the sacro-iliac region and over the entire spinal column; sleeplessness; attacks of numbness in the extremities, of a very decided character, and attended with flexor spasm; a feeling of pressure at the vertex; dyspepsia, and meteorism. For the dysmenorrhœa, and resultant convulsive attacks, the subcutaneous injection of morphia proved the only effective remedy. Happily, local and general treatment has very much modified the tendency to such seizures. But for the relief of some of the more constant reflex symptoms, massage has proved a very hopeful agent. Spinal and sacro-iliac pain and tenderness have been very much relieved by its local use, and its regular employment over the whole body three times a week, while not directly inducing sleep, as in the previous case, has seemed to tranquillize the nervous system and render it more susceptible to chloral and other hypnotics;¹

¹ I think it is in Estradère's work on massage that it is stated that patients undergoing massage are more susceptible to the effects of medicine in general.

and the attacks of numbness and flexor spasm have been much diminished in frequency and severity during its use. Applied to the head, massage has had a decided influence in temporarily relieving that sense of fullness at the vertex which is so common and annoying a symptom in uterine disorders. The meteorism in this case has been for several years a persistent and troublesome symptom. I have often seen the abdomen distended to as great a degree as if she were at the close of gestation, tense and tympanitic, and productive of marked dyspnœa and cardiac spasm by the upward pressure. Massage, locally applied, has been more effective in relieving this condition than any other means employed. Repeatedly has its thorough application, extended over a period of fifteen or twenty minutes, been followed by a subsidence of the tympanites and a restoration in good degree of the natural softness of the abdomen, with a corresponding relief of pain. Incidentally, the constipated condition naturally attending such atony of the muscular coat of the intestines has been in a measure corrected by the repeated applications."

Dr. Stoddard remarks, "In these two uterine cases I should have been at my wits' end many times without massage as a remedial agent." Estradère has said,¹ "Let us know how to make use of massage, if need be, in the cases where the physician has sometimes exhausted his therapeutic means, or, formally yielding to the obsessions of his patients, he is obliged to prescribe or to tolerate it, without, however, compromising his medical knowledge; but do not let us use it for everything."

CASE V. The only other case of amenorrhœa in which I have known massage to be used was that of a young lady with exophthalmic goitre, whose menses had been absent for seven months. By the advice of her physician she made a six weeks' trial of massage without any benefit resulting except that she was soothed at the time of its application and made to feel more comfortable for the day; sometimes the immediate effect was a temporary reduction of the very rapid pulse.

¹ Page 130.

